## DEPARTMENT OF HEALTH AND FAMILY SERVICES Division of Disability and Elder Services Printed 07/28/2006

# **Provider Inspection Summary**

For the period 06/01/2003 to 05/31/2006 Community Based Residential Facility CLASS CNA (NONAMBULATORY) STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

## **Facility Information**

Facility Name: SEGOE GARDENS ASSISTED LIVING (0009246)

Address: 606 NORTH SEGOE RD, MADISON, WI 53705

**License Status: REGULAR** 

Licensed/Certified/Registered 10/01/2001

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey ID: 0096826 End Date: 04/24/2006 Type: STANDARD Purpose: SURVEY  Results: NO STATEMENT OF DEFICIENCY ISSUED  Survey ID: 0092237 End Date: 03/15/2004 Type: STANDARD Purpose: SURVEY  Results: ENFORCEMENT ACTION  Statement of Deficiency: #10007957 Served 03/29/2004			Survey History			
Survey ID: 0092237 End Date: 03/15/2004 Type: STANDARD Purpose: SURVEY  Results: ENFORCEMENT ACTION  Statement of Deficiency: #10007957 Served 03/29/2004	D: 0096826 End Date: 04/2	006 Type: STANDARD	Purpose: SURVEY			
Results: ENFORCEMENT ACTION  Statement of Deficiency: #10007957 Served 03/29/2004	NO STATEMENT OF DEFICIEN	7 ISSUED				
Statement of Deficiency: #10007957 Served 03/29/2004	D: 0092237 End Date: 03/1	004 Type: STANDARD	Purpose: SURVEY			
	ENFORCEMENT ACTION					
Compliance	nt of Deficiency: #10007957 Se	d 03/29/2004				
<u>complained</u>				<u>Compliance</u>		
<u>Deficiencies Cited</u> <u>Subject Area</u> <u>Verified</u> <u>Corrected</u>	Deficiencies Cit	Subject Area		<u>Verified</u>	Corrected	
83.15(1)(c)1 ADEQUATE STAFFING 04/24/2006 Yes	83.15(1)(c)1	ADEQUATE STAFFING		04/24/2006	Yes	
83.21(4)(g) FAIR TREATMENT 04/24/2006 Yes	83.21(4)(g)	FAIR TREATMENT		04/24/2006	Yes	
83.32(2)(d) REVIEW OF PROGRESS 04/24/2006 Yes	, , , <del>, , , , , , , , , , , , , , , , </del>	REVIEW OF PROGRESS		04/24/2006	Yes	
83.41(9) CLEANLINESS OF ROOMS 04/24/2006 Yes	1, 1, 1, 1	CLEANLINESS OF ROOMS	S	04/24/2006	Yes	

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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## **Enforcement History**

Date: 03/25/2004 SOD #10007957 Appealed: Yes Decision: STIPULATION

Sanctions

COMPLY WITH DEPARTMENT PLAN OF CORRECTION

COMPLY WITH REQUIREMENT

PROVIDE TRAINING

FORFEITURE---83.15(1)(c)1

FORFEITURE---83.32(2)(d) 3rd cite

FORFEITURE---83.33(3)(e)1

FORFEITURE---83.33(3)(e)2.a

FORFEITURE---83.41(9)

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